

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	<i>AS</i>		6/10/99
O.I.P.E. CLASSIFIER			6/10/99
FORMALITY REVIEW	<i>TM</i>	7120	6/10/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date			
	Final	Original	05/15	07/07
	01	02	03/29	05/29
1	✓	✓	✓	✓
2	✓	✓	✓	✓
3	✓	✓	✓	✓
4	✓	✓	✓	✓
5	✓	✓	✓	✓
6	✓	✓	✓	✓
7	✓	✓	✓	✓
8	✓	✓	✓	✓
9	✓	✓	✓	✓
10	✓	✓	✓	✓
11	✓	✓	✓	✓
12	✓	✓	✓	✓
13	✓	✓	✓	✓
14	✓	✓	✓	✓
15	✓	✓	✓	✓
16	✓	✓	✓	✓
17	✓	✓	✓	✓
18	✓	✓	✓	✓
19	✓	✓	✓	✓
20	✓	✓	✓	✓
21	✓	✓	✓	✓
22	0			
23	0			
24	0			
25	✓	✓		
26	✓	✓		
27	✓	✓		
28	✓	✓		
29	✓	✓		
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	Final	Original	05/15	07/07
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Claim	Date			
	Final	Original	05/15	07/07
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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